

UNITED STATES BANKRUPTCY COURT
DISTRICT OF NEW JERSEY

Caption in Compliance with D.N.J. LBR 9004-1(b)

Erik M. Helbing, Esq.
1328 Second Ave.
Berwick, PA 18603
570-498-5544 (telephone)
570-371-5445 (telecopy)

Case No.: 19-17145-ABA

Chapter: 13

In Re:
Frances Barrow

Adv. No.: Click or tap here to enter text.

Hearing Date: 5/14/19 @ 10 a.m.

Judge: Andrew B. Altenburg, Jr.

CERTIFICATION OF SERVICE

1. I, Erik M. Helbing, Esq.:

- represent Frances Barrow in this matter.
- am the secretary/paralegal for Click or tap here to enter text., who represents Click or tap here to enter text. in this matter.
- am the Click or tap here to enter text.in this case and am representing myself.

2. On May 2, 2019, I sent a copy of the following pleadings and/or documents to the parties listed in the chart below.

(1) Order Shortening Time Period for Notice, Setting Hearing, and Limiting Notice; (2) Notice of Motion to Vacate Order of Dismissal; (3) Proposed Order on Motion to Vacate Dismissal of Case; (4) Certification of Counsel in Support of the Debtor's Motion to Vacate Order of Dismissal; and (5) Statement as to Why No Brief is Necessary.

3. I certify under penalty of perjury that the above documents were sent using the mode of service indicated.

Date: May 13, 2019

/s/ Erik M. Helbing

Signature

Name and Address of Party Served	Relationship of Party to the Case	Mode of Service
KML Law Group, P.C. 216 Haddon Ave Suite 400 West Mout, NJ 08108-0000	Attorney for AmeriHome Mortgage	<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input checked="" type="checkbox"/> Other Express Mail and Telephone (As authorized by the Court or by rule. Cite the rule if applicable.)
Cenler, FSB 425 Philips Blvd Ewing, NJ 08618	Mortgage Company Servicer (as instructed by secured creditor's counsel)	<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input checked="" type="checkbox"/> Other Express Mail and Telephone (As authorized by the Court or by rule. Cite the rule if applicable.)
Isabel Balboa 535 Route 38 Suite 5 Cherry Hill, NJ 08002	Chapter 13 Trustee	<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input checked="" type="checkbox"/> Other Express Mail and Telephone (As authorized by the Court or by rule. Cite the rule if applicable.)
Click or tap here to enter text.	Click or tap here to enter text.	<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other Click or tap here to enter text. (As authorized by the Court or by rule. Cite the rule if applicable.)
Click or tap here to enter text.	Click or tap here to enter text.	<input type="checkbox"/> Hand-delivered <input type="checkbox"/> Regular mail <input type="checkbox"/> Certified mail/RR <input type="checkbox"/> Other Click or tap here to enter text. (As authorized by the Court or by rule. Cite the rule if applicable.)

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18603513119	Postage	
512119	\$ 25.50	
Time Accepted	Scheduled Delivery Time	
3:10 PM	<input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM <input checked="" type="checkbox"/> 12 NOON	
Weight	10:30 AM Delivery Fee	
lbs.	\$	
oz.	Return Receipt Fee	
Sunday/Holiday Premium Fee		
\$		
Acceptance Employee Initials		
70		
Total Postage & Fees		
\$ 25.50		
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Delivery Attempt (MM/DD/YY)	Time	Employee Signature
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FO ZIP Code 18603	Scheduled Delivery Date (MM/DD/YY) 5/31/19	Postage \$ 25.50	
Date Accepted (MM/DD/YY) 5/21/19	Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 9:00 PM <input type="checkbox"/> 12 NOON	Insurance Fee \$	COD Fee \$
Time Accepted 3:00 PM	10:30 AM Delivery Fee \$	Return Receipt Fee \$	Live Animal Transportation Fee \$
Weight lbs. 0.5 ozs. 0.00	Sunday/Holiday Premium Fee \$	Total Postage & Fees \$ 25.50	
Accepted Employee Initials [initials]			
DELIVERY (POSTAL SERVICE USE ONLY)			
Delivery Attempt (MM/DD/YY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature	
Delivery Attempt (MM/DD/YY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature	

LABEL 11-B, JANUARY 2014

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BERMICK, PA 18603

BERMICK PA 18603
2019

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ORIGIN (POSTAL SERVICE USE ONLY)

PO ZIP Code	Scheduled Delivery Date (MM/DD/YY)	Postage
18603	5/3/19	\$ 25.50
Date Accepted (MM/DD/YY)	Scheduled Delivery Time <input type="checkbox"/> 10:30 AM <input type="checkbox"/> 8:00 PM	Insurance Fee \$ -
3/21/19	10:30 AM Delivery, Feb	COD Fee \$ -
Time Accepted 3:05 PM	Weight 1/2 lb Rate lbs. ozs.	Return Receipt Fee \$ / Live Animal Transportation Fee \$ /
	Acceptance Employee Initials R	Total Postage & Fees \$ 25.50

DELIVERY (POSTAL SERVICE USE ONLY)

Delivery Attempt (MM/DD/YY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
/		
Delivery Attempt (MM/DD/YY)	Time <input type="checkbox"/> AM <input type="checkbox"/> PM	Employee Signature
/		

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